DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS AA (AMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: HIDDEN VIEW CBRF (310418)

Address: N8425 HWY 89, WHITEWATER, WI 53190

License Status: REGULAR

Licensed/Certified/Registered 04/01/1990

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Compliance

Verified

Compliance

Corrected

Survey ID: 0093396 End Date: 09/08/2004 Type: OTHER Purpose: SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008750 Served 10/06/2004

Deficiencies Cited Subject Area

83.21(4)(w) SAFE ENVIRONMENT

Survey ID: 0092571 End Date: 04/20/2004 Type: STANDARD Purpose: SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008986 Served 05/19/2004

Deficiencies Cited Subject Area <u>Verified</u> Corrected

83.42(3)(f) SLEEPING HOURS EVACUATION DRILL

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 10/04/2004 SOD #10008750 Appealed: No

Sanctions

FORFEITURE---83.21(4)(w)

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